



<b>Request to Renew Level VII Certificate of Library Experience</b>
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**Name:** \_\_\_\_\_

**Library:** \_\_\_\_\_

**Library Address:** \_\_\_\_\_

**Library Phone#:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Last 4 digits of SS#:** \_\_\_\_\_

**Please list the CEUs you are submitting in support of your renewal request:**

Workshop	Date(s)	CEUs earned

*Please attach separate sheet if needed.*

**Total CEUs:** \_\_\_\_\_

<i>Please renew my Level VII Certificate of Library Experience.</i>
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<b>Signature:</b> _____
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**Please return this form along with copies of all CEU certificates listed above to:**

Certification Office  
Library of Michigan  
702 W. Kalamazoo St.  
P.O. Box 30007  
Lansing MI 48909